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School District Claim for State Reimbursement for **Individual and Isolated Transportation**

1.75

State	
District	
County	

DUE
DATES

1

1719

No

Second Semester First Semester February 1 to County Superintendent May 10 to County Superintendent **S**: February 15 to State Superintendent May 24 to State Superintendent COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION: This claim is for the period beginning and ending 20 month day month day **CERTIFICATION:** The information on this form is complete and accurate to the best of my knowledge. Date Signature, Chair, Board of Trustees District Level: County: District: 0487 Helena Elem 25 Lewis & Clark Elementary District Contract Daily # of Days Transported # # Shared Family's Name Rate 1 1700 No Flannagan, Bekki J 0.35 1 1703 No Bunger, Bruce 1.00 1704 No Gibson, Guy & Tammy 1 0.55 Zabel, Jackie 1712 No 1.50 1 1713 Randolph, Tommie 1 No 1.50 1 1714 Yes Reimer, Donald 1.00 Lester, Julie 1 1715 Yes 2.35 1716 Robinson, Richard & Vicki 4.75 1 No 1718 Pickett, Kathy J 1 No 2.15

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Knight, Terry L

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School District Claim for State Reimbursement for **Individual and Isolated Transportation**

State	
District	
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DUE

First Semester Second Semester February 1 to County Superintendent May 10 to County Superintendent **DATES:** February 15 to State Superintendent May 24 to State Superintendent COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION: This claim is for the period beginning and ending 20 month day month day **CERTIFICATION:** The information on this form is complete and accurate to the best of my knowledge. Date Signature, Chair, Board of Trustees District Level: County: District: 25 Lewis & Clark 0488 Helena H S **High School** District Contract Daily # of Days Transported # # Shared Family's Name Rate 1 1711 No Bovington, Tere 2.50 Reimer, Donald 1 1714 Yes 1.00 1715 Yes Lester, Julie 2.35 1 1717 2.00 1 No Pomeroy, Steven J 2415 Knoles, Andrea 1 No 1.50 1 2483 No Diaz, Jeannette Jacot, Angie 8.93 1 2484 No

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School District Claim for State Reimbursement for Individual and Isolated Transportation

State	
District	
County	

Second Semester First Semester **DUE** February 1 to County Superintendent May 10 to County Superintendent **DATES:** February 15 to State Superintendent May 24 to State Superintendent COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION: This claim is for the period beginning and ending 20 month day month day **CERTIFICATION:** The information on this form is complete and accurate to the best of my knowledge. Date Signature, Chair, Board of Trustees District Level: County: District: 25 Lewis & Clark 0491 Trinity Elem Elementary District Contract Daily # of Days Transported # # Shared Family's Name Rate 4 1763 No Randolph, Tommie 1.65 David, Jackie 4 2302 No 2.00 4 2427 No Schultz, Joseph & Wendy 1.50 4 Schultz, Wendy 2478 1.50 No

PI

Linda McCulloch, Superintendent
Office of Public Instruction
PO Box 202501

School District Claim for State Reimbursement for Individual and Isolated Transportation

State	
District	
County	

Helena, MT 59620-2501 **Second Semester** First Semester **DUE** February 1 to County Superintendent May 10 to County Superintendent **DATES:** February 15 to State Superintendent May 24 to State Superintendent COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION: This claim is for the period beginning and ending 20 month day month day **CERTIFICATION:** The information on this form is complete and accurate to the best of my knowledge. Date Signature, Chair, Board of Trustees District Level: County: District: 0492 East Helena Elem 25 Lewis & Clark Elementary District Contract **Daily** # of Days Transported # Shared Family's Name Rate 1759 No Jagoda, Jean 1.60

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School District Claim for State Reimbursement for **Individual and Isolated Transportation**

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2315

No

Second Semester First Semester February 1 to County Superintendent May 10 to County Superintendent February 15 to State Superintendent May 24 to State Superintendent COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION: This claim is for the period beginning and ending 20 month day month day **CERTIFICATION:** The information on this form is complete and accurate to the best of my knowledge. Date Signature, Chair, Board of Trustees County: District Level: District: 0495 Wolf Creek Elem 25 Lewis & Clark Elementary District Contract Daily # of Days Transported # Shared Family's Name Rate 13 1223 Yes Ryan, Kim 0.50 13 1764 No Taylor, Dayl 1.40 13 1765 No Taylor, Dayl 1.40 1766 Krenning, Jeanne L 13 No 0.80 1767 Brewer, Mary 13 No 2.00 13 1768 No Johnson, Pamela 2.65 Infanger, Michele 13 1769 No 1.90 13 1770 Wirth, Judy 2.00 No 13 1771 Doherty, Kim No 1.40

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Ryan, Kim

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Linda McCulloch, Superintendent
Office of Public Instruction
PO Box 202501

School District Claim for State Reimbursement for Individual and Isolated Transportation

State	
District	
County	

Helena, MT 59620-2501 **Second Semester** First Semester **DUE** February 1 to County Superintendent May 10 to County Superintendent **DATES:** February 15 to State Superintendent May 24 to State Superintendent COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION: This claim is for the period beginning and ending 20 month day month day **CERTIFICATION:** The information on this form is complete and accurate to the best of my knowledge. Date Signature, Chair, Board of Trustees District Level: County: District: 0497 Craig Elem 25 Lewis & Clark Elementary District Contract **Daily** # of Days Transported # Shared Family's Name Rate 25 2313 No Vandevender, Becky R 3.00

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School District Claim for State Reimbursement for Individual and Isolated Transportation

State	
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County	

Second Semester First Semester **DUE** February 1 to County Superintendent May 10 to County Superintendent **DATES:** February 15 to State Superintendent May 24 to State Superintendent COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION: This claim is for the period beginning and ending 20 month day month day **CERTIFICATION:** The information on this form is complete and accurate to the best of my knowledge. Date Signature, Chair, Board of Trustees District Level: County: District: 25 Lewis & Clark 0502 Augusta Elem Elementary District Contract Daily # of Days Transported # Shared Family's Name Rate 45 1760 Yes Howe-Cobb, Sarah W 3.19 Lux, Cheryl 45 1761 Yes 4.58 45 1762 No McDonough, Rob 1.00

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School District Claim for State Reimbursement for Individual and Isolated Transportation

State	
District	
County	

Second Semester First Semester **DUE** February 1 to County Superintendent May 10 to County Superintendent **DATES:** February 15 to State Superintendent May 24 to State Superintendent COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION: This claim is for the period beginning and ending 20 month day month day **CERTIFICATION:** The information on this form is complete and accurate to the best of my knowledge. Date Signature, Chair, Board of Trustees District Level: County: District: 25 Lewis & Clark 0503 Augusta H S **High School** District Contract Daily # of Days Transported # Shared Family's Name Rate 45 1760 Yes Howe-Cobb, Sarah W 3.19 45 1761 Yes Lux, Cheryl 4.57

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School District Claim for State Reimbursement for **Individual and Isolated Transportation**

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District	
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DATES

First Semester Second Semester February 1 to County Superintendent May 10 to County Superintendent S: February 15 to State Superintendent May 24 to State Superintendent COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION: This claim is for the period beginning and ending 20 month day month day **CERTIFICATION:** The information on this form is complete and accurate to the best of my knowledge. Date Signature, Chair, Board of Trustees County: District Level: District: 25 Lewis & Clark 1221 Lincoln K-12 Schools **High School** District Contract Daily # of Days Transported # Shared Family's Name Rate 38 1756 No Sholder, Janet 0.80 38 1757 No Erickson, Shane & Bridgitt 0.50 38 1758 Shaw, Kathy 0.30 No 2435 Wellenstein, Bill 38 No 2.50 2479 Wellenstein, Bill 38 No 6.50 38 2492 No Meyer, Linda S 2.35 2493 38 No Throgmorton, Levera K 2.35